

NOMINATION FORM

Please complete and forward the following nomination form by 5:00 p.m. on **March 22, 2004**.

For more information:

BY PHONE

(305) 673-7260

BY MAIL

City of Miami Beach
Housing and Community
Development Division
1700 Convention Center Drive
Miami Beach, FL 33139
Attn.: Community Heroes Awards

BY FAX

City of Miami Beach
Housing and Community
Development Division
(305) 673-7772

BY INTERNET

johnquade@miamibeachfl.gov

NOMINEE

Name: _____

Organization: _____

Phone Number: _____

Category: _____

NOMINATOR

Name: _____

Organization: _____

Address: _____

City: _____ State: _____

Phone Number: _____

Relationship to Nominee: _____

Please provide a brief description (on a separate piece of paper) of the nominee's contributions to the Miami Beach community, as well as a brief description of the nominee's efforts. Two letters of supports from other individuals, which include the author's name and phone number are also required. Other supporting materials may be provided, if desired.

Please note: Completed nomination forms, letters of support, and any other materials submitted will not be returned.

SIGNATURE

I agree to nominate this person (organization) for the Community Heroes Awards and confirm that all information provided is accurate. I consent to having my name and photograph published.

Signature of nominator

Date